FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000070751

1. Corporation Name

UNITREND POWER TECHNOLOGY CORP.

Principal Place of Business
7922 NW 67TH ST
MIAMI EL 201CC

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

7922 NW 67TH ST MIAMI FL 33166

2a. Mailing Address

Suite, Apt. #, etc.

26

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90005 004 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

08/26/1996

65-0692087

4. FEI Number

22	· · · · · · · · · · · · · · · · · · ·	27			-	5. Octubence of Classes Desired		Fee F	Required
City & State	9	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	I to Fees
Zip	Country	Zip	Zip Cour			8. This corporation owes the current ye			
24	25	29	30			Personal Property Tax.		Yes	□No
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
	F7 HIAN D			81	Name				
LOPEZ, JUAN P				82	Street Addres	ss (P.O. Box Number is Not Acceptable)			·-·
7922 NW 67TH ST MIAMI FL 33166									- · · · ·
				83					
				84	City			85 Zip	Code
				FL °'					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered									
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was ions of, Section 607.0505, F	authorized Torida Statu	by th tes.	ie corporation	is board or directors. I hereby accept the	арроп	unem as	egistered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICER	RS AND		
TITLE	D DELETE		1.1 TITL	1.1 TITLE				Change	Addition
NAME	Lopez, Juan P		1.2 NAA	ΚE	1				
STREET ADDRESS	ADDRESS 7922 NW 67TH ST			REETA	DDRESS				Ì
CITY-ST-ZIP	MIAMI FL 33166		1,4 CIT	Y-ST-Z	ZIP				
TITLE		☐ DELETE	2.1 TITL	Æ				☐ Change	Addition
NAME			2.2 NAM	ΜE			•		
STREET ADDRESS			2.3 STR	REETA	DDRESS				
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NAME			3.2 NAA	ΜE					
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CITY-ST-ZIP			3.4. CIT	Y-ST-	ZIP				
TITLE		☐ DELETE	4.1 T(T)	LE				☐ Change	Addition
NAME			4.2 NA	ME					ļ
STREET ADDRESS			4.3 STF	REETA	DDRESS				ł
CITY-ST-ZiP			4,4 CIT	Y-ST-	ZIP				
TITLE		☐ DELETE	5.1 TITL	LE 🥆				Change	Addition
NAME			5.2 NAM	ME					
STREET ADDRESS	•		5.3 STF	REET A	DDRESS				
CITY-ST-ZIP			5.4 CIT	Y-\$T-	ZIP				
TITLE		☐ DELETE	6.1 TITU	LE				☐ Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 STF	REETA	DORESS			-	{
CITY-ST-ZIP			6.4 CIT	Y-\$T-	ZIP	Λ			
	415 41 -4 41 - 1-5	h this filing does not qualify	for the even	antio	n stated in Se	action 119 07(3)(i) Florida Statutes, I furth	ar certi	fy that the	information

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 117.07(3)(1), Florida Statutes, and that I am an effect or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receiver or trustee empowered to execute this report as Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: